

EDITOR'S MISCELLANY



THE *Journal of Medicine and Science* is our authority for the following, printed in connection with the announcement of the meeting of the American Medical Association, July 11 to 14 inclusive:

"The railroad companies are lending assistance to the Lewis and Clarke fair project with an enthusiasm that has not characterized their attitude towards earlier expositions, and have provided lower rates from distant points than were ever before offered for a similar event. Under the schedule already made out, a person living in the Mississippi Valley may come to Portland and return for forty-five dollars. The rate for the round trip is fifty-two dollars and fifty cents from St. Louis and fifty-six dollars and fifty cents from Chicago, and one fare from points farther east. The tickets sold will be good for ninety days, and will provide almost unlimited stop-over privileges, thus making the chance to see the country as great an attraction to tourists as the exposition itself. Yellowstone Park may be visited at small expense, and it is expected that arrangements will be perfected whereby a person may go one way by one of the northern routes and the other by way of California. Up and down the Columbia the scenery is magnificent, and there are many places of historical interest well worth visiting. A large number of handsome and comfortable river steamers will make regular trips to these points during the exposition period, from June 1 to October 15."

PNEUMONIA CONTAGIOUS.—Although the doctors have not yet found a specific for pneumonia and acknowledge that in its treatment they are compelled to trust largely to nursing and nourishment, the bacillus of the disease is known, and the doctors have decided that it is a contagious disease. A New York physician asserts that out of one hundred persons it will be found that fully forty-five are carrying around, snugly stowed away in the nostrils and air-passages, thousands of pneumococci which are only waiting for a chance to catch their owner in a weakened or rundown condition to get in their deadly work.

The disease is communicable through the sputum, which dries and allows the germs to be carried about by every breeze that blows. For this reason the Board of Health of New York has caused it to be placed on the list of contagious diseases, of the same class as tuberculosis.

The precautions recommended to prevent its spread are the same as for the other disease—segregation, the avoidance of spitting on the street, the disinfection of articles used by the patient, and the fumigation of the room and all articles which have been close enough to become infected. As the percentage of deaths from pneumonia is greater than from diphtheria, typhoid, or scarlet fever, it may surely be classed as one of the most dangerous of the contagious diseases. The precautions should be commensurate with its deadly character. In this city, though not classed strictly as a contagious disease, it is listed as a reportable disease, which means that a physician who finds a case of pneumonia must report the same to the Health Officer, so that the latter can take such measures as may seem best to prevent the spread of the complaint and to protect the public.—*Medico-Chirurgical Journal*.

WOUNDS IN THE RUSSIAN ARMY.—*Medical Press*, February 8, 1905, remarks: As all surgeons who served in South Africa are aware, the experience in that war has made a revolution in the treatment of bullet-wounds. At the beginning of that war it was the custom to treat perforating wounds as if they were septic, and to operate in nearly every case; but a short experience showed that those cases did best which were left alone, and, on the whole, the mortality of bullet-wounds proved unexpectedly low. From a letter of Professor von Manteuffel, who was attached to General Kuropatkin's army, it will be found that a similar state of things is observed among the wounded Russians in the Far East. The Japanese use a bullet of unusually small bore, which produces wounds of but little gravity. Perforating wounds of the abdomen, thorax, and cranium in most instances heal readily, unless where immediately fatal. Indeed, the bullet very often has but little "stopping power." It was not uncommon to apply a bit of plaster to a perforating wound before and behind, and allow the wounded man to continue on duty. Officers, too, continued to command after suffering bullet wounds in the leg, abdomen, thorax, or neck. The lack of "stopping power" of the Japanese bullets is to be attributed not only to their small size, but to their extreme hardness, which prevents "spreading." Professor von Manteuffel mentions an interesting point with regard to shells in common use by the Japanese. They are filled with an explosive of such high power that when they explode they are reduced to fragments of mere powder, and are therefore comparatively harmless. In fact, the only injuries from such explosions are rupture of the tympanic membrane and irritation of the mucous membrane of the nose.—*The Virginia Medical Semi-Monthly*.